

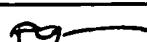
01919
112603

U.S. PTO

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

PTO/SB/17 (10/96)
Approved for use through 09/30/98. OMB 0851-0032
Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE**FEE TRANSMITTAL**

		Complete if Known			
		Application Number		unassigned	
		Filing Date		herewith	
		First Named Inventor		Girish K. Muralidharan	
		Group Art Unit		unknown	
		Examiner Name		unknown	
TOTAL AMOUNT OF PAYMENT	(\$)	1,762.00		Attorney Docket Number	138256SV/YOD (GEMS:0249)

METHOD OF PAYMENT (check one)				FEE CALCULATION (continued)					
1. <input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge indicated fees and credit any over payments to: 50-2402/138256SV/YOD (GEMS:0249)				3. ADDITIONAL FEES					
Deposit Account Number	GE Medical Systems			Large Entity Fee Code (\$)	Small Entity Fee Code (\$)	Fee Description	Fee Paid		
Deposit Account Name				105	130	205 .65	Surcharge - late filing fee or oath		
<input checked="" type="checkbox"/> Charge Any Additional Fee Required Under 37 CFR 1.16 and 1.17	<input type="checkbox"/> Charge the Issue Fee Set in 37 CFR 1.18 at the Mailing of the Notice of Allowance, 37 CFR 1.31(b)			127	50	227 .25	Surcharge - late provisional filing or cover sheet.		
2. <input type="checkbox"/> Payment Enclosed:				139	130	139 .130	Non-English specification		
<input type="checkbox"/> Check <input type="checkbox"/> Money Order <input type="checkbox"/> Other				147	2,520	147 2,520	For filing a request for reexamination		
FEE CALCULATION (fees effective 10/01/96)									
1. FILING FEE									
Large Entity Fee Code (\$)	Small Entity Fee Code (\$)			Fee Description	Fee Paid				
1001	740	2001	375	Utility filing fee	<u>770.00</u>				
1002	330	2002	165	Design filing fee	—				
1003	520	2003	260	Plant filing fee	—				
1004	750	2004	375	Reissue filing fee	—				
1005	160	2005	80	Provisional filing fee	—				
SUBTOTAL (1)				(\$)					
				<u>770.00</u>					
2. CLAIMS									
Total Claims	49	-	20	=	29	X	18	=	522.00
Independent Claims	8	-	3	=	5	X	86	=	430.00
Multiple Dependent Claims	Extra			Fee from below	Fee Paid				
Large Entity Fee Code (\$)									
1202	18	2202	9	Claims in excess of 20	—				
1201	84	2201	42	Independent claims in excess of 3	—				
1203	280	2203	140	Multiple dependent claim	—				
1204	84	2204	42	Reissue independent claims over original patent	—				
1205	18	2205	9	Reissue claims in excess of 20 and over original patent	—				
SUBTOTAL (2)				(\$)					
				<u>952.00</u>					
* Reduced by Basic Filing Fee Paid									
SUBMITTED BY									
Typed or Printed Name		Patrick S. Yoder		Reg. Number	37,479				
Signature				Date	November 26, 2003	Deposit Acct. User ID	50-2402/138256SV/YOD (GEMS:0249)		

Complete (if applicable)

Please type a plus sign (+) inside this box → +

PTO/SB/05 (12/97)

Approved for use through 09/30/00. OMB 0651-0032

Patent and Trademark Office: U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid OMB control number.

UTILITY PATENT APPLICATION TRANSMITTAL <small>(Only for new nonprovisional applications under 37 CFR 1.53(b))</small>	Attorney Docket No.	138256SV/YOD GEMS:0249	Total Pages	50
	First Named Inventor or Application Identifier Girish K. Muralidharan			U.S.P.T.O. 112603 16884 0723864
	Express Mail Label No.		EV 410 034 384 US	



APPLICATION ELEMENTS <small>See MPEP chapter 600 concerning utility patent application contents.</small>		ADDRESS TO: Commissioner for Patents Mail Stop Patent Application, P.O. Box 1450 Alexandria, VA 22313-1450		
<p>1. <input checked="" type="checkbox"/> Fee Transmittal Form (Submit an original, and a duplicate for fee processing)</p> <p>2. <input checked="" type="checkbox"/> Specification Total Pages <u>28</u> (preferred arrangement set forth below) -Descriptive -Cross References to Related Application -Statement Regarding Fed sponsored R & D -Reference to Microfiche Appendix -Background of the Invention -Brief Summary of the Invention -Brief Description of the Drawings (if filed) -Detailed Description -Claim(s) -Abstract of the Disclosure</p> <p>3. <input checked="" type="checkbox"/> Drawing(s) (35 USC 113) Total Sheets <u>4</u> Total Pages <u>12</u></p> <p>4. Oath or Declaration a. <input checked="" type="checkbox"/> Newly executed (original or copy) b. <input type="checkbox"/> Copy from a prior application (37CFR 1.63(d)) (for continuation/divisional with Box 17 completed) (Note Box 5 below) i. <input type="checkbox"/> DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 CFR 1.63(d)(2) and 1.33(b).</p> <p>5. <input type="checkbox"/> Incorporation By Reference (useable if Box 4b is checked) The entire disclosure of the prior application, from which a copy of the oath or declaration is supplied under Box 4b, is considered as being part of the disclosure of the accompanying application and is hereby incorporated by reference therein.</p>				
ACCOMPANYING APPLICATION PARTS				
<p>6. <input type="checkbox"/> Microfiche Computer Program (Appendix)</p> <p>7. <input type="checkbox"/> Nucleotide and/or Amino Acid Sequence Submission (if applicable, all necessary)</p> <p>a. <input type="checkbox"/> Computer Readable Copy b. <input type="checkbox"/> Paper Copy (identical to computer copy) c. <input type="checkbox"/> Statement verifying identity of above copies</p> <p>8. <input checked="" type="checkbox"/> Assignment Papers (cover sheet & document(s))</p> <p>9. <input type="checkbox"/> 37 CFR 3.73(b) Statement <input checked="" type="checkbox"/> Power of Attorney (where there is an assignee)</p> <p>10. <input type="checkbox"/> English Translation Document (if applicable)</p> <p>11. <input type="checkbox"/> Information Disclosure Statement (IDS)/PTO-1449 <input type="checkbox"/> Copies of IDS Citations</p> <p>12. <input type="checkbox"/> Preliminary Amendment</p> <p>13. <input checked="" type="checkbox"/> Return Receipt Postcard (MPEP 503)</p> <p>14. <input type="checkbox"/> Small Entity <input type="checkbox"/> Statement filed in prior application Statement(s) Status still proper and desired</p> <p>15. <input type="checkbox"/> Certified Copy of Priority Document(s) (if foreign priority is claimed)</p> <p>16. <input type="checkbox"/> Other</p>				
17. <input type="checkbox"/> Continuation <input type="checkbox"/> Divisional <input type="checkbox"/> Continuation-in-part (CIP) of prior application No: /				

18. CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	<input checked="" type="checkbox"/> Correspondence address below		
(Insert Customer No. or Attach bar code label here)			
NAME	Patrick S. Yoder FLETCHER YODER		
ADDRESS	P.O. Box 692289		
CITY	Houston	STATE	Texas
COUNTRY	USA	TELEPHONE	(281) 970-4545
		ZIP CODE	77269-2289
		Fax	(281) 970-4503

Burden Hour Statement: This form is estimated to take 0.2 hours to complete. Time will vary depending upon the needs of the individual case. Any comments on the amount of time you are required to complete this form should be sent to the Chief Information Officer, Patent and Trademark Office, Washington, DC 20231. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS. SEND TO: Commissioner for Patents, P.O. Box 1450, Mail Stop Patent Application, Alexandria, VA 22313-1450.